

AMERICAN SOCIETY OF HOSPITAL PHARMACISTS

No. 4

September, 1943

OUR FIRST BIRTHDAY

The first annual meeting of the AMERICAN SOCIETY OF HOSPITAL PHARMACISTS was held in Columbus, Ohio on Sept. 9, 10 and 11, 1943 in conjunction with the 91st annual meeting of the American Pharmaceutical Association. While ninety years separate these initial meetings let us exert ourselves to make certain another ninety years do not elapse before we ascend to the estimable position held by our mother organization, the American Pharmaceutical Association - in the profession, in governmental circles and in society and the health services generally.

The meetings were, everything considered, well attended - averaging close to seventy - much better than was anticipated. Members attending were from the nearby border states of Michigan, Kentucky, Pennsylvania, West Virginia and Indiana, in addition to others from the District of Columbia, New Jersey, New York, North Carolina, South Carolina, Louisiana, Oklahoma, Arkansas, Illinois, Nebraska, Minnesota, California, etc. A gratifying number of new members were signed up - but the fact still remains the total number does not approach the potential and the responsibility for increasing membership is one for each of us to assume.

The new officers selected for the year 1944 came as a reward to some of those who have long had the interests of the Society at heart. We welcome them and feel a sense of security in knowing the affairs of the Society are entrusted to their guidance during the forthcoming year. Let us resolve to help in every way possible.

It should be noted that some relief has been given to Miss Landeen who for several years now has given an unusual amount of her time at the expense of considerable energy and money to the development of the Society as it stands today. It hardly seems sufficient to say, simply - "Thanks! - Hazel".

Chairman:

Don E. Francke
University Hospital
Ann Arbor, Michigan

Vice-Chairman:

Hazel E. Landeen
1313 East Ann Street
Ann Arbor, Michigan

Secretary:

I. Thomas Reamer
Duke University Hospital
Durham, N. C.

Treasurer:

Sister Mary Joh
Mercy Hospital
Toledo, Ohio

One change in the Constitution was proposed at the Columbus meeting and is offered for your action. It is for the purpose of recognizing and making available the abilities and energies of that group of persons who have a real unselfish interest in the Society. In our original application for recognition this paragraph was inadvertently omitted - undoubtedly due to the many times the Constitution was transcribed.

ARTICLE-III. Membership:

Section 1. (c) Associate Members may be elected from among individuals who have demonstrated particular interest in hospital pharmacy, and may be other than hospital pharmacists. They should be members of the American Pharmaceutical Association, who by their work in the medical services, the teaching of students or hospital pharmacists, or by other contributions to hospital pharmacy or to the Society have demonstrated eligibility for this recognition. Associate members shall be elected in the regular manner, and on payment of an annual fixed fee, shall continue in this classification. Such member shall not be eligible to vote or participate in the election of general officers or affairs of the Society.

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See BALLOT on final BULLETIN sheet.

BULLETIN - A. S. H. P.

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PERSONAL

Leo F. Godley, Chief Pharmacist at Norfolk (Va) General Hospital has a most interesting article in September HOSPITAL MANAGEMENT on his experiences in a S.C. Hospital Pharmacy.

Shirley C. Titus, Secretary, California State Nurses Association reports on the status of economic security for nurses in the September MODERN HOSPITAL in a manner that will appeal to hospital pharmacists who can see themselves in a similar plight.

September MODERN HOSPITAL also presents some factual material on the subject "Small Hospitals Dispense Without a Pharmacist". Examine this.

Chas. C. Scoles, formerly Fitzsimmons General Hospital, Denver, reports he is "going to take it easy" for several months. Best wishes on the come-back.

Wm. F. Andrews has been discharged from his Army post at Station Hospital, Huachuaca, Arizona and has returned to his home in Detroit, Michigan.

Alden B. Mills, Managing Editor, Modern Hospital, was a visitor at the meetings of the ASHP in Columbus. His interest in the group is appreciated.

R. P. Fischelis, Trenton, N.J. and well known to hospital pharmacists has been awarded the 1943 Remington Medal by the N.Y. Branch, A.Ph.A. We are glad.

Sister Jeanne Marie is now pharmacist at St. Elizabeth's Youngstown, Ohio replacing----

Sister Mary Adelaide who has taken post as Superintendent in Lorain, O. St. Joseph's Hospital.

THE TRADING POST

CRESOL DERIVATIVES are still difficult. A mixture of ortho- and para-Benzyl-phenols (Santophens) is very interesting. Product has a high phenol coefficient and is economical to formulate. Possibility of a contact dermatitis has not been fully explored but disinfecting solutions for washing walls, mopping, and such other uses has proven satisfactory in a number of laboratories. 31

POCKET KNIFE using discarded surgical blades of Bard-Parker type is procurable at a nominal charge. 32

PHYSIOLOGY CHART, in full colors, is fascinating, interesting & shows the analogy between organs of body and a number of mechanical devices. Size is 19 x 38-inches. 33

TUMBLE JAR of heavy molded glass in 1 $\frac{1}{2}$ -gal. size, 5 $\frac{1}{2}$ " top opening, screw top, corrosion-proof metal support (15" high) is available through most laboratory supply houses. 34

CELLULOSE TUBING, seamless, Viscose-type is available in sizes from a 18/32" inflated diameter to 5-1/2". Minimum orders of \$1.00 accepted. 35

DISTILLED WATER CHECKER is a compact convenient instrument indicating purity by measuring electrical conductivity. It is practical in operation and provides simple accurate checks. Furnished with a Dip Cell of resistant glass at a nominal cost. Larger models, more expensive, are available for permanent installation and provide a continuous record of conductivity in parts per million. Can be installed with an alarm device. 36

MIXER, high-speed, Waring BLENDOR is capable of many small duties in the pharmacy. Simple mixing, emulsions, comminution, pulverization, etc. are some of the uses of this small mixer that was originally offered to householders. 37

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no.9CHAIRMAN'S ADDRESS:

When we focus our attention on this Society of Hospital Pharmacists we can only feel that we are standing at the beginning of a new era. I like to compare our present position with the military and, for example, a special need for a "highway" - it might be the Alcan Highway, a trail hacked through the jungles of Guadalcanal or a pass scratched over the Owen Stanley mountains - all obstacles in the way of progression toward wider and more pleasant highways that permit the more complete enjoyment of life, and its freedoms, in both its professional and social phases.

If now we can only roughly sketch the general course to be followed; if we will actively co-operate with the leaders and help all along the way; if we will have faith in ourselves, in each other, in the profession; then, and only then, shall we have made a beginning. A modicum of careful planning at this time - not necessarily for the entire route - with but a single goal in sight (but with the ultimate forever in our minds) will provide an achievement of which we can be forever proud. We must, and shall, set our sights high; we must, and shall, look only for the best in professional practices; and then we can, and will, expect that complete professional recognition accorded our brothers and sisters in the public health services and allied professions.

Some impatience, some discouragement, some desperation, some futility has been displayed during, and concerning, the organization of Hospital Pharmacists. Whatever characteristics have been on display now is the time to decide on our objective, to find our place in the larger organization of the health service, to settle all disagreements, and to give all we are able to the building of this "highway" to the better manner of living to which we should aspire. I hesitate somewhat to speak of a manner of living because I feel we are entitled to such a way only if we, each and every one, are willing to work toward that end. Need I remind you the whole is no stronger than the weakest part. Need I remind you that organized Hospital Pharmacy will

be subject to this same evaluation and the place that Hospital Pharmacy assumes in the public health services will be estimated on this basis. We shall never be any stronger, more capable or more respected than any single part we may choose to include within our whole. Weak links, when discovered, either should have their defects repaired - or removed entirely.

We can now believe we should enjoy some satisfaction in having made a start in organization - though the task of conceiving a nucleus has at times seemed in the realm of the impossible. We can now believe we deserve congratulations for this organization of charter members - small though it may be (probably about five percentum of all Hospital Pharmacists). We know these pioneers will have to apply themselves seriously and conscientiously to the work of "hacking, scratching and building" a pathway through the uncharted areas and imposing obstacles that are before us. Nevertheless, these hills, swamps, the undergrowth, the overgrowth, all apparent impediments, should never be allowed to obscure the general direction we shall set toward the goal of professional respectability and a secure and free way of living in the atmosphere of our chosen field of special endeavor.

Whatever detailed course we choose to follow, let magnanimity and altruism be our guide, for if we should be labelled personal and selfish much shall be denied to us and much effort will be sterile. As a part and parcel of such planning let me recommend for your consideration the resolutions forthcoming from this, our first, of what is hoped shall be many annual meetings. Briefly these resolutions will bear on certain desirable characteristics inherent in all professions; contact behaviour with other members of our multi-faceted profession; our place in the educational program, our duties to society; and, the placing of "highway markers" on the contemplated travel of our profession for the benefit of those who may follow along the trail we propose to blaze.

If we attain some degree of success then let us pray we shall have had enough idealism to fire the spirit and enthusiasm of those that do follow to accept our objectives and continue with the effort of smoothing the way. This should be our immediate task.

And lastly, may I enumerate some of the phases of our profession, and its work, I feel we must consider. If we definitely record ourselves on only a few of these matters we will have made a beginning. If we can only submit an opinion on the other subjects we will have progressed even further - for, remember, these are uncharted territories and if even the best of these opinions, at this time, prove eventually to be wrong we shall not be criticised for having made the effort (for many of us will undoubtedly get our "feet wet" before all the proper "drains" are complete). These suggested subjects for consideration follow:

1. Shall we continue the fight for a uniformly acceptable system of collegiate training.

2. Shall we ask for an amplification of present curricula, revising them so our general education in the liberal arts is increased, our professional education to include more subjects designed to bring us closer and of more assistance to the medical profession and its work.

3. Shall we not develop a research spirit by revising our own practices and actively engage in an evaluation, or re-evaluation, of the tools, methods and end-products with which we are in daily contact - our materia medica.

4. Shall we attempt to determine the absolute minimum requirement for post-graduate experience (if this be the method of approach) for the special practice of Hospital Pharmacy. This may involve the source of this experience - (qualitative); the time element involved - (quantitative); and a recognition of such suitable,

supervised experience by an award of generally acceptable recognition or certification - (academic).

5. Shall we seek national recognition (registration), permitting practice in any State of the Union, by proposing a minimum of educational and experience qualifications for all States to follow - thus raising the professional levels for all practicing pharmacists.

6. Shall we express our thoughts on the subject of using present facilities for post-war health services, or should the establishment and expansion of health centers (possibly under Federal control) be encouraged. Or, perhaps, there may be a happy medium combining the two projects.

7. Do we have any feelings on the presumed encroachment of monopolistic (sic!) elements in the larger sphere of the drug "industry" (of manufacturing and distribution). Simple practices in pharmacy are now reserved to the Hospital Pharmacist, but, where do the simple practices end and the more complex practices begin. If one, by schooling, does acquire certain abilities for the "more complex" practices then how to extend them. And lastly, might not the 90-day "pharmacists" be held as sufficient for the "simple" practices.

Indorsement: The above subjects have not included any suggestion of monetary reward - for a good reason. The Hospital Pharmacist, as he grows in capabilities, and stature, will find the need for proper reward is most evident to all and it may be satisfactorily adjusted from time to time as achievements are brought into view. Demonstrate your professional character and ability and the rest will naturally follow - prestige, respect, faith, trustfulness, and - living reward.

Signed:

H.A.K. Whitney
Chairman

ABSTRACTS of the sort following are gathered from many sources. It may be noted that articles appearing in the Journal of the A.Ph.A. are seldom quoted - the presumption being that these are available to you and need not be discussed. If you have any suggestions for this service your comment will be sincerely appreciated.

PENICILLIN, being produced by seven drug manufacturers at present, is still short on supply. The FDA has designated Dr. Chester S. Keefer, Evans Memorial Hospital, Boston, Mass. as Chairman of investigating group.

GRADE LABELS are being vigorously protested by many pressure groups, including NARD and the subject has been dropped for the present by OPA. It seems anomalous for a group like NARD to oppose grade labelling on the one hand and then specifically detail USP & NF products to the profession and to their own 'drugtrade'.

COTTONSEED OIL is regarded by OPA as a food and subject to rationing. A confusing situation has resulted in those cases where uses are limited to the medicinal & pharmaceutical.

LANOLIN (Wool Fat) will be allocated sometime this month. It is probable the exemption will be placed at the level of 10-lbs./month.

ISOPROPYL ALCOHOL for external preparations is receiving a great deal of recognition - due in part to the unavailability of Ethanol. The NF has tentatively proposed a monograph for this alcohol and it now seems it may receive official status. Proposed title is "Propanol".

OINTMENT, Anesthetic, according to authors are great comfort to patients who have open wounds with tender edges which require frequent dressings. Argue their value is not generally realized or this method of pain relief not sufficiently used. PSMAC

LEAD POISONING reported successfully treated with Sod. Citrate orally. No ill effects noted. AmJMSc

SULFONAMIDE, ointments, in hydrophilic bases may become contaminated. Adding certain chemicals (Urea peroxide-1%) strongly increases self-sterilizing properties of these ointments and is worthy of consideration if not essential as a safety factor. JAMA

BLOOD, preservation, for blood-sugar determinations can be insured by addition of 1.25-1.5% Sod. fluoride. ChAb

BURNS from Caustic Soda are treated with irrigation of 5% Ammon. Chlorid. If used early it will prevent much damage. When used about the eyes it is followed with warm Boric Acid solution. As burn develops it may be approached in more usual fashion. BMJ

B.P. SIXTH ADDENDUM lists several new ointment basis - one very interesting base has the following character:

<u>Ung. Alcoholium Lanae</u>	
-Ointment of Wool Alcohols	
*Wool Alcohols	60.0
Hard Paraffin	240.0
White/Yellow Paraffin	100.0
Liquid Paraffin	600.0
to make	1,000.0

*-previously called "Wool-Wax".
100 gm. of this Ointment will make up 100 gm. of Water. N.B.-a minimum Cholesterol content of 28% is specified for the "Wool-Alcohols" (made by saponifying Wool Fat and separating the position containing Cholesterol & associated Alcohols. PJ43

ANESTHETIC, Local, of Procaine or Cocaine type are potentiated when mixed with Magnesium Benzoate, according to recent patent.

CATHARTIC emulsion is claimed in a recent patent incorporating, Water, Oil, and precipitated Magnes. Trisilicate as emulsifying agent.

GERMICIDE solution for cold sterilization comprising 7-8% Formaldehyde, an aliphatic alcohol (Propanol-?) and an aliphatic Nitrite is said to be non-corrosive to metals.

EPINEPHRINE solutions, 1%, are said to be better tolerated by inhalation, with less drying of throat, when 5% Glycerin is incorporated. JALL

EPINEPHRINE in a Gelatin vehicle for subcutaneous injection (and perhaps other drugs and biologically active substances) where retardation of effect is desired is subject of recent article. Methods of preparation are outlined and described. JAll

PYRIDOXINE used clinically in treatment of nausea and vomiting of pregnancy is said to provide complete or considerable relief when used intramuscularly in doses of 50-100 mgm. three times weekly. AmJobGyn

PHARMACY CORPS examination regulation will shortly be available to officer candidates for the 72 vacancies. Date & locations will be announced later. Men in service will be preferred.

RAYON FILTERS, special fabric, to be placed in an inexpensive apparatus for filtering blood and plasma is offered by American Viscose Corp. NYC

LIQ. HYDRARGYR. NITRAT. ACIDUS - BPC
Acid Solution Mercuric Nitrate

Mercury	120.0-gm.
Nitric Acid	150.0-cc.
Distilled Water	45.0-cc.

Mix Acid and Water in tared vessel and dissolve Mercury with aid of heat-boil gently till solution weighs 360.0-gm. Preserve in well-stoppered bottles. NB-inquiry came from a Dermatologist for this escharotic solution. The BPC is a fine supplement to our own standards and should be in every Hospital Pharmacists library.

BARBITAL, Elixir, rapidly absorbed is proposed in a new study that indicates Glycerin interferes with empty-time of stomach and drug absorption. If this study is confirmed it would seem that other glycerin-containing elixirs are in for careful scrutiny.

Barbital-sodium	30.0-gm.
Caramel	20.0
Sp. Vanillin Comp.	30.0-cc.
Syrup	375.0
Talc, purified	30.0-gm.
Distilled Water, qs ad	1000.0-cc.

JAPhA

GLYCOGEN, from Corn, given intravenously, to rabbits is well tolerated and utilized indicating the material may be useful clinically. JBCh

DETERGENT (Alkaline Cleaning Powder) is advanced for laboratory uses:

**Calgon	4.5
**Wetting Agent	2.0
Sod. metasilicate	15.0
Tetrasod. pyrophosphate	18.0
Sod. triphosphate	59.0
#Dreft	1.5
to make	100.0

* - Sod. hexa-metaphosphate

** - Not named (see: Dreft)

- Sod. lauryl sulfate

Solution is used at about 70C in an approximate 1% concentration. This Rx can be used as a suggestion. JChEd

CHLOROBUTANOL in parenteral solutions is said to exhibit optimum conditions of use, involving constancy of pH and stability in "buffered solutions at pH3-6 up to 65C" and in "unbuffered solutions at pH3-4 up to 65C". APhA

WETTING AGENTS should be compatible when used with antiseptics. Cationic, anionic and neutral wetting agents are said to enhance (variously) antiseptics - excluding Phenol, Cresol & Tr. Iodine. Am.J.P.H.

AGAR reclamation is becoming of increasing interest and is the subject for several articles. Two very practical methods have recently been published by Gov't. agencies. Sc.

IODINATED organic compounds for radiographic diagnoses are announced as Ethyl-iodo-phenyl-undecylates. Eastman Kodak is sponsoring and clinical reports are expected shortly. JACS

SULFANILAMIDE water-solutions, stable, are subject of recent German patent. Dextrose & Methenamine (10 & 7.5%) are said to give 2.5% "sulfa" solution.

Para-Amino-Benzoic-Acid (PABA) is being used to prevent sunburn in concentrations of 10-15% in a suitable base. Cost of PABA would seem to operate against general use despite its assumed efficacy. J.Inv.Drm.

DEMEROL will shortly go on sale to the profession. FDA has approved this analgesic. Price schedule to be announced shortly by Winthrop.